

**REYNOLDS SCHOOL DISTRICT**

531 REYNOLDS ROAD, GREENVILLE PA 16125, MERCER COUNTY



Phone: 724-646-5500 ext. 5525  
 Facsimile: 724-646-5507  
 E Mail: awilkinson@reynoldssd.org

**TO WHOM IT MAY CONCERN:**

The following student(s) entered our district on \_\_\_\_\_

Student Name	Birthdate	Grade Level
_____	_____	_____
_____	_____	_____
_____	_____	_____

**AUTHORIZATION FOR RELEASE OF SCHOOL RECORDS**

I hereby grant permission to disclose and deliver to:

Mrs. Anna Wilkinson—Child Accounting  
 Reynolds School District  
 531 Reynolds Road  
 Greenville, PA 16125

all cumulative school records (including current grade transcripts, special education records, test scores), health records, psychological reports (including confidential materials, results, scores and recommendations), and discipline records in accordance with the requirements of the Family Educational Rights and Privacy Act of 1974, PL 93-380, Section 438. All the material and information will be handled in a confidential manner.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Name, Address and Phone Number of Previous School:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_